

State of Minnesota

District Court

County

Judicial District:	
Court File Number:	
Case Type:	

Petitioner

and

**Affidavit for Filing Foreign
Protective Order**

Respondent

STATE OF MINNESOTA)
) SS
COUNTY OF _____)
(County where Affidavit signed)

I, _____, am the person filing a foreign protective order pursuant to Minn. Stat. § 518B.01, subd 19a.

I further state my belief that the foreign protective order filed with this affidavit is a valid order and has not been amended, rescinded or superseded by any orders from a court of competent jurisdiction.

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

Dated: _____

Signature

Name: _____

Address: _____

City/State/Zip: _____

Telephone: (_____) _____

E-mail address: _____